

Schedule A - Parts I & II

Organization Name:

EIN:

Part I - Unrelated Trade or Business Income

Activity Description _____

2024

2023

Gross receipts or sales _____

Nonaccrual experience method - amounts not accrued _____

Returns and allowances _____

Other income (list) _____

Part II - Deductions Not Taken Elsewhere

2024

2023

Salaries and wages _____

Repairs and maintenance _____

Bad debts _____

Interest expense _____

Taxes and licenses _____

Depletion _____

Contributions to deferred compensation plans _____

Employee benefit programs _____

Other deductions (list) _____

Net operating loss arising on or after January 1, 2018 _____

Schedule A - Part III

Organization Name:

EIN:

Part III - Cost of Goods Sold

Activity Description _____

Inventory method: Cost Lower of cost or market Other _____

	2024	2023
Inventory at the beginning of the year	_____	_____
Purchases	_____	_____
Cost of labor	_____	_____
Additional section 263A costs	_____	_____
Other costs (list):	_____	_____
_____	_____	_____
_____	_____	_____
Inventory at the end of the year	_____	_____

Schedule A - Parts IV & Part V

Organization Name:

EIN:

Part IV - Rent Income

Activity description _____

Description of property _____

Address _____

City _____ State _____ ZIP _____

Foreign province / state _____ Country _____ Postal code _____

2024 2023

Rent received from personal property _____

Rent received from real and personal property _____

Deductions directly connected with the income entered above _____

Part V - Unrelated Debt-Financed Income

Description of debt-financed property _____

Address _____

City _____ State _____ ZIP _____

Foreign province / state _____ Country _____ Postal code _____

2024 2023

Gross income from, or allocable to, debt-financed property _____

Deductions directly connected with, or allocable to, debt-financed property:

Straight-line depreciation _____

Other deductions _____

Amount of monthly average acquisition indebtedness _____

Percentage allocable to debt financed income _____

Adjusted basis on the first day of the tax year _____

Adjusted basis on the last day of the tax year _____

Average adjusted basis _____

Percentage allocable to debt financed income _____

Schedule A - Parts VI & VII

Organization Name:

EIN:

Part VI - Interest, Annuities, Royalties, and Rents from Controlled Organizations

Activity description

Name of controlled organization EIN

Exempt Controlled Organizations:

2024

2023

Net unrelated income (loss)

Total of specified payments made

Specified payments entered on the previous line that are included in the organization's gross income

Deductions directly connected with income entered on the previous line

Nonexempt Controlled Organizations:

Taxable income

Net unrelated income (loss)

Total of specified payments made

Specified payments entered on the previous line that are included in the organization's gross income

Deductions directly connected with income entered on the previous line

Part VII - Investment Income of a Section 501(c)(7), (9), or (17) Organization

Description of income

2024

2023

Amount of income

Deductions directly connected to the investment income

Set-assets for:

Charitable purposes

Directly connected reasonable administrative costs for charitable purposes

Payment of life, sick, accident, or other benefits by VEBA or SUB

Directly connected reasonable administrative costs for payments by VEBA or SUB

2024 Tax Organizer Exempt Organization Information

General Information

Organization name		EIN	
Doing business as			
Street address, city, state, and ZIP			
Email address			
Phone number	Cell number	Fax number	

Yes No

Does the organization file under a calendar year?
 If "No," what is the tax year begin date? _____ Tax year end date? _____

The organization is exempt under section:
 501 () () 408(e) 408A 529(a) 220(e) 530(a) 529A

If the organization is filing a group return or if the organization is a central / subordinate organization in a group exemption and is filing a separate return, what is the group exemption number? _____

What type of entity is the organization?
 Corporation Trust Association Other trust State college / university

Is the organization a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation?

Did the organization have any unrelated trades or businesses?
 If "Yes," how many? _____

During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidary controlled group?
 If "Yes," provide the following information for the parent corporation
 Employer ID number (EIN) _____
 Name of parent corporation _____

Provide the name and phone number of the person who has the organization's books and records.

Name _____
 Phone number _____

Estimates

	Federal		Resident State	
	Date Paid	Amount	Date Paid	Amount
Overpayment applied from 2023	_____	_____	_____	_____
First quarter	_____	_____	_____	_____
Second quarter	_____	_____	_____	_____
Third quarter	_____	_____	_____	_____
Fourth quarter	_____	_____	_____	_____
Additional payments	_____	_____	_____	_____

Account Information for Withdrawals

Name of Bank	Bank Routing Number	Bank Account Number	Type of Account	
			Checking	Savings

